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**FACSIMILE TRANSMISSION**

TOTAL PAGES (Including Cover Page) 10 DATE: December 27, 2005

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TO: Attn: Examiner Stevan A. Resan FROM: Mr. Robert J. Depke, Reg. No. 37,607

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**NOTES:**

Inventor: Atsushi Kato  
Serial No.: 10/714,021  
Art Unit: 1773  
Title: Magnetic Recording Medium  
Filed: November 13, 2003  
Attorney Ref.: 075834.00447

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PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/714,021
	Filing Date	November 13, 2003
	First Named Inventor	Atsushi Kato et al.
	Art Unit	1773
	Examiner Name	Stevan A. Resan
Total Number of Pages in This Submission	Attorney Docket Number	075834.00447

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Remarks The Commissioner is hereby authorized to charge any fees due or credit any overpayment to Deposit account No. 20-1495. A duplicate copy of this sheet is enclosed. CUSTOMER NO. 33448		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Robert J. Depke, Trexler, Bushnell, Giangiorgi, Blackstone & Marr, Ltd.		
Signature			
Printed name	Robert J. Depke Esq.		
Date	12/27/05	Reg. No.	37,607

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Typed or printed name	Amy Mitchell	Robert J. Depke	Date
			12/27/05


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FORM PTO-1083

Attorney Docket No. 075834.00447

In re application of: Atsushi Kato et al.  
 Serial No.: 10/714,021  
 Filed: November 13, 2003  
 Examiner: Stevan A. Resan  
 Art Unit: 1773  
 For: MAGNETIC RECORDING MEDIUM

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Andrew Mitchell	

COMMISSIONER FOR PATENTS  
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Sir:

Transmitted herewith is an Amendment in Response to the Office Action mailed September 30, 2005.

The filing fee has been calculated as shown below:

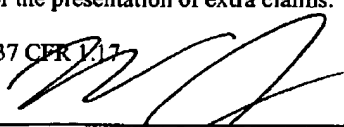

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid for	Present Extra
TOTAL	* 8	MINUS	** 20	0
INDEP.	* 2	MINUS	** 3	0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				

SMALL ENTITY		OR	LARGE ENTITY	
Rate	Addit. Fee		Rate	Addit. Fee
x 25 =	\$ .00		x 50 =	\$ .00
x 100 =	\$ .00		x 200 =	\$ .00
+ 180 =	\$ .00		+ 360 =	\$ .00
TOTAL			TOTAL	
ADDIT. FEE	\$ .00	OR	TOTAL	\$ .00

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.  
 The "Highest Number Previously Paid For" (Total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Enclosed is a Petition For Extension Of Time.
- ☐ The Commissioner has been authorized to charge Deposit Account No. 20-1495 in the amount of \$ \_\_\_\_\_ for the extension of time fee for a large entity. A duplicate copy of this sheet is enclosed.
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- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1495. A duplicate copy of this sheet is enclosed.
- ☒ Any filing fees required under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Dated: 12/27/05

  
 Robert J. Depke Reg. No. 37,607  
  
 Paige A. Kitzinger Reg. No. 39,979  
 Attorneys of Record

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**Appl. No.:** 10/714,021  
**Inventor:** Atsushi Kato  
**Filed:** November 13, 2003  
**TC/A.U.:** 1773  
**Examiner:** Stevan A. Resan  
**Docket No.:** 075834.00447  
**Customer No.:** 33448

**Confirmation No.:** 1983

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**AMENDMENT A**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

S I R:

In response to the Office Action of September 30, 2005, please amend the above-identified application as follows:

**Amendments to the Claims** begin of page 2 of this paper.

**Remarks/Arguments** begin on page 5 of this paper.